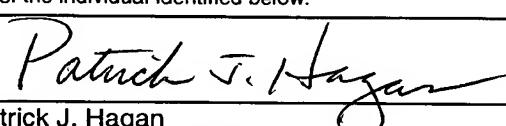


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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No.	0685-UNMC.63183	Total Pages	21	
		First Named Inventor or Application Identifier				
		Jonathan Vennerstrom				
		Express Mail Label No.	EV325930172US	Date Mailed: August 25, 2003		
<b>APPLICATION ELEMENTS</b> <i>See MPEP chapter 600 concerning utility patent application contents.</i>			<b>Commissioner for Patents</b> <b>ADDRESS TO: P.O. Box 1450</b> <b>Arlington, VA 22313-1450</b>			
1. <input checked="" type="checkbox"/>	Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	6. <input type="checkbox"/>	Microfiche Computer Program (Appendix)			
2. <input checked="" type="checkbox"/>	Specification (preferred arrangement set forth below) <ul style="list-style-type: none"> <li>- Descriptive title of the Invention</li> <li>- Cross References to Related Applications</li> <li>- Statement Regarding Fed sponsored R&amp;D</li> <li>- Reference to Microfiche Appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (if filed)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul>	(Total Pages 19)	7. <input type="checkbox"/>	Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary) <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Copy</li> <li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li> <li>c. <input type="checkbox"/> Statement verifying identity of above copies</li> </ul>		
3. <input checked="" type="checkbox"/>	Drawing(s) (35 USC 113)	(Total Sheets 2)	8. <input type="checkbox"/>	Assignment Papers (cover sheet & document(s))		
4. <input type="checkbox"/>	Oath or Declaration	(Total Pages )	9. <input type="checkbox"/>	37 CFR 3.73(b) Statement	[ ] Power of Attorney	
a. <input type="checkbox"/>	Newly executed (original or copy)	10. <input type="checkbox"/>	English Translation Document (if applicable)			
b. <input type="checkbox"/>	Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> <i>[Note Box 5 Below]</i>	11. <input type="checkbox"/>	Information Disclosure Statement (IDS)/PTO-1449	[ ] Copies of IDS Citations		
i. <input type="checkbox"/>	DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	12. <input type="checkbox"/>	Preliminary Amendment			
5. <input type="checkbox"/>	Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	13. <input checked="" type="checkbox"/>	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)			
17. a. <b>If a CONTINUING APPLICATION, check appropriate box and supply requisite information.</b>	14. <input checked="" type="checkbox"/>	Applicant	[ ] Statement Filed in prior claims	Small Entity	Statement Filed in prior application, Status still proper and desired	
	15. <input type="checkbox"/>	Certified Copy of Priority Document(s) (if foreign priority is claimed)				
	16. <input type="checkbox"/>	Other: _____				
<b>18. CORRESPONDENCE ADDRESS</b>						
<input checked="" type="checkbox"/> Customer Number 000110 or <b>DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.</b> 1601 Market Street, Suite 2400 Philadelphia, PA 19103-2307 Phone (215) 563-4100 Facsimile (215) 563-4044						
to the attention of the individual identified below.						
 Patrick J. Hagan Registration No. 27,643						

# FEE TRANSMITTAL

		<i>Complete if known</i>	
		Application Number: Not Yet Assigned	
		Filing Date: August 25, 2003	
		First Named Inventor: Jonathan Vennerstrom	
		Group Art Unit: Not Yet Assigned	
Examiner Name: Not Yet Assigned			
Total Amt. of Payment: (1)+(2)+(3)=	\$375	Attorney Docket Number: 0685-UNMC.63183	

<b>METHOD OF PAYMENT (check one)</b>		<b>Fee Calculation (continued)</b>																					
1. The Commissioner is hereby authorized to: <input type="checkbox"/> Charge indicated fees <input checked="" type="checkbox"/> Charge additional fees <input checked="" type="checkbox"/> Credit overpayments to the account of DANN, DORFMAN, HERRELL & SKILLMAN Deposit Account Number <u>04-1406</u>		<b>ADDITIONAL FEES</b> <b>Fee Description</b> <b>Fee Paid</b> Surcharge-late filing fee or oath _____ Surcharge - late provisional filing fee or cover sheet _____ Extension for response within first month _____ Extension for response within second month _____ Extension for response within third month _____ Extension for response within fourth month _____ Notice of Appeal _____ Filing a brief in support of an appeal _____ Request for oral hearing _____ Petition to revive unavoidably abandoned application _____ Petition to revive unintentionally abandoned application _____ Issue fee _____ Petitions to the Commissioner _____ Petitions related to provisional applications _____ Submission of Information Disclosure Stmt. _____ Recording each patent assignment per property _____ Other fee (specify) <u>Advance Order (10 copies)</u> _____ Other fee (specify) <u>TERMINAL DISCLAIMER</u> _____ <b>SUBTOTAL (3)</b> _____																					
<b>FEE CALCULATION</b> 1. <b>FILING FEE</b> <b>Fee Description</b> <b>Fee</b> Utility filing fee <u>\$375.00</u> Design filing fee _____ Plant filing fee _____ Reissue filing fee _____ Provisional filing fee _____ <b>SUBTOTAL (1)</b> <u>\$375</u>																							
2. Claims <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: right; width: 15%;">Paid</th> <th style="text-align: right; width: 15%;">Extr</th> <th style="text-align: right; width: 15%;">Fee</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td style="text-align: right;">17</td> <td style="text-align: right;">-20</td> <td style="text-align: right;">= 0</td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: right;">1</td> <td style="text-align: right;">-3</td> <td style="text-align: right;">= 0</td> </tr> <tr> <td>Multiple Dependent (First presentation)</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td colspan="2" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td style="text-align: right;"><u>\$0</u></td> </tr> </tbody> </table>					Paid	Extr	Fee	Total Claims	17	-20	= 0	Independent Claims	1	-3	= 0	Multiple Dependent (First presentation)					<b>SUBTOTAL (2)</b>		<u>\$0</u>
	Paid	Extr	Fee																				
Total Claims	17	-20	= 0																				
Independent Claims	1	-3	= 0																				
Multiple Dependent (First presentation)																							
	<b>SUBTOTAL (2)</b>		<u>\$0</u>																				

Submitted By:

Typed or

Printed Name Patrick J. Hagan Reg. Number 27,643

Signature Patrick J. Hagan Date August 25, 2003

Deposit Account User ID  
04-1406